This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09 320609

Total Fee Calculation

		~	M				
	Fee Code	Total # Claims	Number Extra	<u> </u>	Fee	Fee = Total	
	Sm/Lg.				Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101					760 = 760	
Total Claims >20	203/103	<u>55</u> -20 =	25 >	<		18 = 450)
Independent Claims >3	202/102	33=	<u>D</u> >	<	-		
Mult. Dep Claim Present	204/104					_ = _	
Surcharge	205/105	• •				130 = 130	•
English Translation	139						
TOTAL FEE CALCUL	ATION .					· - 1340)
Fees due upon filing	the application	1 :				 .	
Total Filing Fees Du	e = ' \$_	1340		-		,	
Less Filing Fees Sub	mitted -\$_		-		· ·		•
BALANCE DUE	= 2 _	1340		 -			
Office of Initial Pater	O. Examination		. •				
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PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

09/320609

CLAIMS AS FILED - PART I								SMALL EN			OTHER THAN		
FOR			(Column 1)			(Column 2)		ı _	TYPE		OR	SMALL ENTITY	
FC	OR 		NUMBI	ER FILED	NUM	IBER E	EXTRA		RATE	FEE		RATE	FEE
ВА	SIC FEE									380.00	OR	1.0	760.00
то	TAL CLAIMS		53	minus	20= * 2	5			X\$ 9=		OR	X\$18=	450
	EPENDENT CI	1	<u>ී</u>		3 = *)			X39=		OR	X78=	
MU	ILTIPLE DEPEN	NDENT (CLAIM P	RESENT	/\	<u> </u>			+130=		OR	+260=)
* If	the difference	in colu	mn 1 is	less than z	ero, enter "(0" in c	olumn 2	-	TOTAL		OR	TOTAL	1210
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AMENDMENT B	Independent	CL/ REM/ AF AMEN *	AIMS AINING TER DMENT	Minus	HIGHES NUMBE PREVIOU PAID FO	ST ER JSLY OR	PRESENT EXTRA	AI	RATE	TIONAL		RATE	TIONAL
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